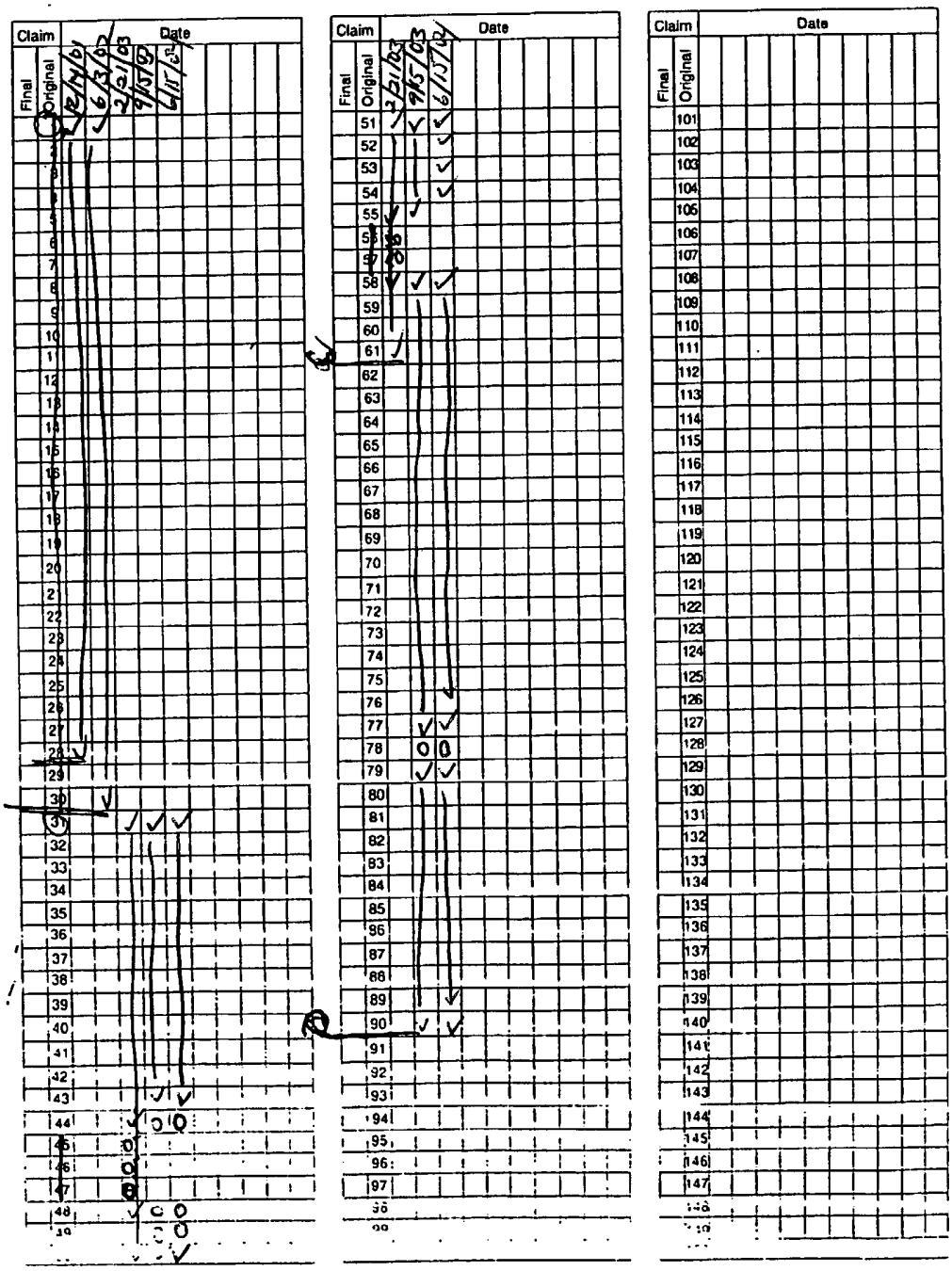
ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | KW | | 9/15/03 |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

09/622942

## INDEX OF CLAIMS

| | | | |
|---|---|---|---|
| ✔ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — | (Through numeral)... Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |




If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY